SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)						PAGE 3837 / 16865					
	16	X	17a		17b		17c		17d		18
	19a		19b		20a		20b		20c		21

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NAME OF COMMITTEE (In Full)

Full Name (Last, First, Middle Initial)	Transaction ID : C11297770						
Evie Frost Mailing Address 14 Thayer St	Date of Receipt 06 07 2011						
City Brookline	State Zip Code MA 02445-6837						
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period					
Name of Employer Homemaker	Occupation Homemaker	250.00					
Receipt For: 2012 ✓ Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 850.00						
Full Name (Last, First, Middle Initial) Evie Frost							
Mailing Address 14 Thayer St		06 15 / Y Y Y Y Y					
City Brookline	State Zip Code MA 02445-6837						
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period					
Name of Employer Homemaker	Occupation Homemaker	500.00					
Receipt For: 2012 Primary General Other (specify) ▼	Election Cycle-to-Date 850.00						
Full Name (Last, First, Middle Initial) Edward T. A. Fry		Transaction ID : C11267779 Date of Receipt					
Mailing Address 160 E 71st St		06 02 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
City Indianapolis	State Zip Code IN 46220-1012						
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period					
Name of Employer St. Vincent Medical Group	Occupation Physician	500.00					
Receipt For: 2012 ☐ Primary ☐ General Other (specify) ▼	Election Cycle-to-Date 1000.00						
Subtotal Of Receipts This Page (optional)	1250.00					